

**RECEIVED
CENTRAL FAX CENTER****FEB 19 2008****FAX TRANSMISSION****DATE:** February 19, 2008**PTO IDENTIFIER:** Application Number 10/535,626-Conf. #7499
Patent Number**Inventor:** Seijiro Tomita**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** EDWARDS ANGELL PALMER & DODGE LLP

William L. Brooks

PHONE: (202) 478-7370**Attorney Dkt. #:** 80454(302770)**PAGES (Including Cover Sheet):** 13**CONTENTS:** Transmittal (1 page)
Fee Transmittal Form (1 page)
Amendment Transmittal (1 page)
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment in Response to Non-Final Office Action (7 pages)
Charge \$60.00 to deposit account 04-1105
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (202) 478-7370 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

EDWARDS ANGELL PALMER & DODGE LLP
P.O. Box 55874, Boston, Massachusetts 02205
Telephone: (617) 239-0100 **Facsimile:** (617) 227-4420

PTO/SB/97 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/535,626

Attorney Docket No.: 80454(302770)

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on February 19, 2008
Date


Signature

Rebecca L. Brimmer

Typed or printed name of person signing Certificate

Registration Number, if applicable

(202) 478-7370

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Transmittal (1 page)
Fee Transmittal Form
Amendment Transmittal (1 page)
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment in Response to Non-Final Office Action (7 pages)
Charge \$60.00 to deposit account 04-1105

RECEIVED
CENTRAL FAX CENTER

FEB 19 2008

PTO/SB/21 (10-07)

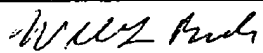
Approved for use through 10/31/2007. OMB 0651-0031


U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/535,626-Conf. #7499
	Filing Date	December 2, 2005
	First Named Inventor	Seijiro Tomita
	Art Unit	2628
	Examiner Name	P. K. Nguyen
Total Number of Pages in This Submission	Attorney Docket Number	80454(302770)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 2px; width: 150px; float: left; margin-bottom: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	William L. Brooks		
Date	February 19, 2008	Reg. No.	34,129

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.	
Dated: February 19, 2008	Signature:  (Rebecca L. Brinmer)

238239

RECEIVED
CENTRAL FAX CENTER

003/013

FEB 19 2008

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618). FEE TRANSMITTAL For FY 2008		Complete if Known Application Number 10/535,626-Conf. #7499 Filing Date December 2, 2005 First Named Inventor Seijiro Tomita Examiner Name P. K. Nguyen Art Unit 2628 Attorney Docket No. 80454(302770)	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	60.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

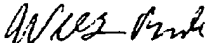
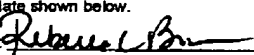
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES Small Entity Fee (\$)		SEARCH FEES Small Entity Fee (\$)		EXAMINATION FEES Small Entity Fee (\$)		Fees Paid (\$)
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims						370	185
Total Claims 10		Extra Claims - 20 =		Fee (\$) x		Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims 1		Extra Claims - 3 =		Fee (\$) x		Fee Paid (\$)	
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets - 100 =		Extra Sheets /50 =		Number of each additional 50 or fraction thereof (round up to a whole number) x		Fee (\$) =	
						Fee Paid (\$)	
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): 2251 Extension for response within first month						60.00	

SUBMITTED BY			
Signature	<i>William L. Brooks</i>	Registration No. (Attorney/Agent)	34,129
Name (Print/Type)	William L. Brooks	Telephone	(202) 478-7370
		Date	February 19, 2008

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.	
Dated: February 19, 2008	Signature: <i>Rebecca L. Brimmer</i> (Rebecca L. Brimmer)

Z38237

FEB 19 2008

AMENDMENT TRANSMITTAL LETTER			Docket No. 80454(302770)		
Application No. 10/535,626-Conf. #7499	Filing Date December 2, 2005	Examiner P. K. Nguyen	Art Unit 2628		
Applicant(s): Seijiro Tomita					
Invention: LIGHT SOURCE DEVICE FOR THREE-DIMENSIONAL DISPLAY					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	10	- 20 =		x	
Independent Claims	1	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					60.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					60.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>04-1105</u> in the amount of \$ <u>60.00</u> A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 William L. Brooks Attorney/Agent Reg. No.: 34,129 EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (202) 478-7370			Dated: <u>February 19, 2008</u>		
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below. Dated: February 19, 2008 <div style="display: inline-block; width: 400px; text-align: center;"> Signature:  (Rebecca L. Brimmer) </div>					